



STATEMENT OF PARTNERSHIP AUTHORITY

(Instructions on back of application)

The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-303.

1. The name of the partnership is: _____ .

2. The street address of its chief executive office is: _____
_____ .

3. The street address of one (1) office in Idaho: _____
_____ .

4. The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
_____	_____
_____	_____
_____	_____

OR the name and address of the registered agent in Idaho is:

5. The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Signature of at least 2 partners:

1) _____

Typed Name _____

2) _____

Typed Name _____

3) _____

Typed Name _____

Secretary of State use only

INSTRUCTIONS

Optional: If the document is incorrect where can you be reached for questions? _____

Note: Complete and submit the application in duplicate.

1. Line 1 - Enter the name of the partnership. The name of the partnership shall not include words of organization which deceptively imply that the partnership is a different kind of legal entity and shall not be the same as or deceptively similar to the name of another legal entity filed with the Secretary of State's Office.
2. Line 2 - Enter the street address of its chief executive office (not a PO Box or Personal Mail Box)
3. Line 3 - Enter the street address of an office in Idaho (not a PO Box or Personal Mail Box)
4. Line 4 - List the name and mailing address of all partners OR the name and street address of its registered agent. The registered agent is a person designated to receive service of process upon litigation. This person should be located in Idaho at a street address.
5. Line 5 - Enter only the names of the partners authorized to execute transferring of real property in the name of the partnership.
6. Line 6 - Requires the signature of at least 2 partners.
7. Enclose the appropriate fee:
 - a. If the application is typed the fee is \$100.00.
 - b. If the application is not typed or a non-standard form is used, the fee is \$120.00.
 - c. If expedited service is requested, add \$20.00 to the filing fee.
 - d. If the fees are to be paid from the filing party's pre-paid customer account, conspicuously indicate the customer account number in the cover letter or transmittal document.
8. Mail or deliver to:

Office of the Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080
9. If you have questions or need help, call the Secretary of State's Office at (208) 334-2301.